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01/25/2005

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William H. Eilberg

(Depositor's name)

William H. Eilberg

(Signature)

April 11, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/682,376	10/09/2003	Fraser C. Henderson	325-11	6107

TITLE OF INVENTION: COMPUTER SIMULATION MODEL FOR DETERMINING DAMAGE TO THE HUMAN CENTRAL NERVOUS SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/25/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
WALLING, MEAGAN S	2863	702-152000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list

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1 William H. Eilberg

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3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Computational Biodynamics, LLC

Virginia Beach, Virginia

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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- ☐ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

William H. Eilberg

Date April 11, 2005

Typed or printed name

William H. Eilberg

Registration No. 28,009

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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April 11, 2005

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Office of Publications
Commissioner for Patents
P.O. Box 1450
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Re: U.S. Patent Application
Serial No. 10/682,376; filed October 9, 2003
Invention of Fraser C. Henderson et al
Title: COMPUTER SIMULATION MODEL FOR DETERMINING DAMAGE
TO THE HUMAN CENTRAL NERVOUS SYSTEM
File No. 325-11

Dear Sirs:

I am transmitting an Issue Fee Transmittal (Form PTOL-85) and a Credit Card Payment Form (Form PTO-2038), for payment of the issue fee and publication fee for the above application.

This transmission contains three pages, including this cover letter.

Please confirm receipt of this transmission, by sending a fax to me at 215-885-4603.

I hereby certify that this letter, and an Issue Fee Transmittal (Form PTOL-85) and Credit Card Payment Form (Form PTO-2038), in the above-identified application, are being transmitted by facsimile to the United States Patent and Trademark Office, to fax number 703-746-4000, on the date shown above.

William H. Eilberg

William H. Eilberg
Registration No. 28.009
Attorney for Applicants

VIA FAX to 703-746-4000

WHE/st